


ENGINEERING CHANGE PROPOSAL (ECP), PAGE 1					1. DATE (YYMMDD) 030527		Form Approved OMB No. 0704-0188	
Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and the Office of Management and Budget, Washington, DC 20503.								
PLEASE DO NOT RETURN YOUR COMPLETED FORM TO EITHER OF THESE ADDRESSES. RETURN COMPLETED FORM TO THE GOVERNMENT ISSUING CONTRACTING OFFICER FOR THE CONTRACT/PROCURING ACTIVITY NUMBER LISTED IN ITEM 2 OF THE COMPLETED DD FORM 1692.								
4. ORIGINATOR			b. ADDRESS (City, Street, State, Zip Code)			5. CLASS OF ECP		
a. TYPED NAME (First, Middle Initial, Last) Kimberly Wheat			U.S. Army TACOM/ARDEC ATTN: AMSTA-AR-WEP-RP Rock Island, IL 61299-7300			II		
8. ECP DESIGNATION			6. JUST. CODE			7. PRIORITY		
a. MODEL/TYPE PACK/MARK			b. CAGE CODE 59678			D R		
c. SYSTEM DESIGNATION MUNITIONS PACKAGING/MARKING GENERAL			9. BASELINE AFFECTED					
d. ECP NO. R3K3024			e. TYPE			f. REV		
						FUNCTIONAL ALLOCATED <input type="checkbox"/> PRODUCT <input checked="" type="checkbox"/>		
11. SPECIFICATIONS AFFECTED			10. OTHER SYS./CONFIG. ITEMS AFFECTED					
			YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
12. DRAWINGS AFFECTED								
a. SYSTEM			CAGE Code			Specification/Document No.		
b. DEVELOPMENT			Rev			SCN		
c. PRODUCT			CAGE Code			Number		
			28820			ACV00561		
						REV		
						NOR		
						B R3K3017.1		
13. TITLE OF CHANGE ADDITION OF 2D BAR CODE MARKING REQUIREMENTS								
14. CONTRACT NO. AND LINE ITEM DAAA09- Current/Future OSC/JMC Ammunition Contracts					15. PROCURING CONTRACTING OFFICER			
					a. NAME (First, Middle Initial, Last)			
					b. CODE			
					c. TELEPHONE NO.			
16. CONFIGURATION ITEM NOMENCLATURE AMMUNITION MARKING					17. IN PRODUCTION			
					<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
18. ALL LOWER LEVEL ITEMS AFFECTED								
a. NOMENCLATURE					b. PART NO.		c. NSN	
19. DESCRIPTION OF CHANGE ECP R3K3017 implemented a change to ACV00561 regarding placement of 2D bar codes. This ECP clarifies the location of the bar codes.								
20. NEED FOR CHANGE ECP R3K3017 contains erroneous information regarding placement of the bar codes.								
21. PRODUCTION EFFECTIVITY BY SERIAL NUMBER					22. EFFECT ON PRODUCTION DELIVERY SCHEDULE			
N/A					N/A			
23. RETROFIT								
a. RECOMMENDED ITEM EFFECTIVITY					c. SHIP/VEHICLE CLASS AFFECTED			
N/A					N/A			
b. ESTIMATED KIT DELIVERY SCHEDULE					d. LOCATIONS OR SHIP/VEHICLE NUMBERS AFFECTED			
N/A					N/A			
24. ESTIMATED COST/SAVINGS UNDER CONTRACT					25. ESTIMATED NET TOTAL COSTS/SAVINGS			
N/A					N/A			
26. SUBMITTING ACTIVITY					b. TITLE			
a. AUTHORIZING SIGNATURE Kimberly Wheat					Packaging Specialist			
27. APPROVAL/DISAPPROVAL								
a. CLASS I			b. CLASS II			c. CLASS II		
<input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL			<input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED			<input type="checkbox"/> CONCUR IN CLASSIFICATION OF CHANGE <input type="checkbox"/> DO NOT CONCUR IN CLASSIFICATION OF CHANGE		
d. GOVERNMENT ACTIVITY					e. SIGNATURE		f. DATE (YYMMDD)	
					[Signature]		030613	
g. APPROVAL					h. GOVERNMENT ACTIVITY		i. SIGNATURE	
<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED							j. DATE (YYMMDD)	

ATTACHMENT 019

NOTICE OF REVISION (NOR)		1. DATE (YYMMDD) 030527	Form Approved OMB No. 0704-0188
THIS REVISION DESCRIBED BELOW HAS BEEN AUTHORIZED FOR THE DOCUMENT LISTED.			
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PLEASE DO NOT RETURN YOUR COMPLETED FORM TO EITHER OF THESE ADDRESSES, RETURN COMPLETED FORM TO THE GOVERNMENT ISSUING CONTRACTING OFFICER FOR THE CONTRACT/PROCURING ACTIVITY NUMBER LISTED IN ITEM 2 OF THIS FORM.		3. DODAAC	
4. ORIGINATOR	b. ADDRESS (Street, City, State, Zip Code)	5. CAGE CODE	6. NOR NO. R3K3024.1
a. TYPED NAME (First, Middle Initial, Last) Kimberly Wheat	CDR, TACOM/ ARDEC ATTN: AMSTA-AR-WEP-RP Rock Island, IL 61299-7300	19200	
		7. CAGE CODE	8. DOCUMENT NO.
		19200	ACV00551
9. TITLE OF DOCUMENT UNIT LOAD MARKING FOR SHIPMENT AND STORAGE, AMMUNITION AND EXPLOSIVES		10. REVISION LETTER	
		a. CURRENT B	b. NEW
12. CONFIGURATION ITEM (OR SYSTEM) TO WHICH ECP APPLIES GENERAL AMMUNITION PACKAGING		11. ECP NO. R3K3024	
DESCRIPTION OF REVISION			
R3K3017 Applies Change from: "7. BAR CODING UNIT LOADS (SEE FIGURE 2). (A) 2D (PDF417) BAR CODING SYMBOLOGY AND DATA ELEMENTS TO BE ENCODED SHALL BE IAW DRAWING 12999545. UNLESS OTHERWISE SPECIFIED, THE 2D BAR CODE LABEL SHALL BE APPLIED ON THE UPPER RIGHT QUADRANT ON THE SHORT DIMENSION OF THE UNIT LOAD. THE LABEL SHALL BE APPLIED ON ONE OF THE FLAT SIDES OR FRONT OF THE PALLET AND ANOTHER ON THE OPPOSITE SIDE." TO: "7. BAR CODING UNIT LOADS (SEE FIGURE 2). (A) 2D (PDF417) BAR CODING SYMBOLOGY AND DATA ELEMENTS TO BE ENCODED SHALL BE IAW DRAWING 12999545. UNLESS OTHERWISE SPECIFIED, THE 2D BAR CODE LABEL SHALL BE APPLIED ON THE UPPER RIGHT QUADRANT ON THE SHORT DIMENSION OF THE UNIT LOAD. ONE LABEL SHALL BE APPLIED ON ONE OF THE FLAT SIDES OR FRONT OF THE PALLET. THE OTHER LABEL WILL BE PLACED ON EITHER ADJACENT SIDE."			
14.			
a. (X one)	<input checked="" type="checkbox"/> (1) Existing document supplemented by this NOR may be used in manufacture. <input type="checkbox"/> (2) Revised document must be received before manufacturer may incorporate this change. <input type="checkbox"/> (3) Custodian of master document shall make above revision and furnish revised document.		
b. ACTIVITY AUTHORIZED TO APPROVE CHANGE FOR GOVERNMENT		c. TYPED NAME (First, Middle Initial, Last)	
d. TITLE Configuration Manager	e. SIGNATURE 	f. DATE SIGNED (YYMMDD) 030612	
15. a. ACTIVITY ACCOMPLISHING REVISION	b. REVISION COMPLETED (Signature)	c. DATE SIGNED (YYMMDD)	